



LEMBAGA HASIL DALAM NEGERI MALAYSIA  
RETURN FORM OF EMPLOYER  
UNDER SUBSECTION 83(1) OF THE INCOME TAX ACT 1967  
This form is prescribed under section 152 of the Income Tax Act 1967

Form  
**E**

REMUNERATION  
FOR THE YEAR  
**2018**  
CP 8 - P. 2018

COMPLETE THE FOLLOWING ITEMS

Name of employer :

Reference no. :   
( Identification / passport /  
registration no. \* )  
[ \* Delete whichever is not relevant ]

Employer's no. : E

Correspondence address :

Postcode	<input type="text"/>	Town	<input type="text"/>
State	<input type="text"/>		

## FORM E 2018

### IMPORTANT REMINDER

- Due date to furnish this form: **31 March 2019**
  - Form E will only be considered complete if C.P.8D is submitted on or before 31 March 2019. Employers who have submitted information via *e-Data Prais* need not complete and furnish C.P.8D.
  - Failure to furnish Form E on or before 31 March 2019 is an offence under paragraph 120(1)(b) of the Income Tax Act 1967 (ITA 1967).
  - Failure to prepare and render Form EA / EC to employees on or before 28 February 2019 is an offence under paragraph 120(1)(b) of ITA 1967.
- Please:
  - refer to the Explanatory Notes before filling up this form.
  - complete all relevant items in BLOCK LETTERS and use **black** ink pen.
- Pursuant to section 89 of ITA 1967, a change of address must be furnished to Lembaga Hasil Dalam Negeri Malaysia (LHDNM) within 3 months of the change. Notification can be made via *e-Kemaskini* or by using Form CP600B (Change of Address Notification Form) which can be obtained at the LHDNM Official Portal: <http://www.hasil.gov.my>
- Employers which are companies and Labuan companies (Companies) - The use of e-filing (e-E) is mandatory.
  - Employers other than Companies - The use of e-filing is encouraged.
- For further information, please contact Hasil Care Line:-  
Toll Free Line: 1-800-88-5436 (LHDN)      Calls From Overseas: 603-77136666

### FOR OFFICE USE

<input type="text"/>	<input type="text"/>
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Date received 1

Date received 2



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**RETURN FORM OF EMPLOYER**  
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Form  
**E**

REMUNERATION  
 FOR THE YEAR  
**2018**  
 CP6-Pln, 2018

1 Name of employer as registered

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2 Employer's no.  \_\_\_\_\_

Please Take Note

3 Status of employer

1 = Government      2 = Statutory      3 = Local authority  
 4 = Private Sector - Company      5 = Private Sector - Other than company

Category of Taxpayer	Due Date for Submission of RF according to the relevant Act	Grace Period for Submission of RF and Payment of Balance of Tax (if any)			
		Method and Grace Period	e-Filing	Via Postal Delivery	By Hand-Delivery
<b>Return for The Year Of Remuneration 2018</b>					
i. Company / Labuan Company Employers	31 March 2019	Method: ✓	✓	X	X
		Grace Period: 1 month		None	None
ii. NON-company / NON-Labuan Company Employers		Method: ✓	✓	✓	✓
		Grace Period: 1 month	3 working days	None	
<b>Partnerships, Associations, Deceased Persons' Estate and Hindu Joint Families - Return for the Year of Assessment 2018</b>					
Resident Individuals Who Do NOT Carry On Business	e-Filing Submission due date will be extended to 30 April 2019	Method: ✓	✓	✓	✓
		Grace Period: 15 days	3 working days	None	
Resident Individuals		Method: ✓	✓	✓	✓

Postcode \_\_\_\_\_ Town \_\_\_\_\_

State \_\_\_\_\_

10 Telephone no. \_\_\_\_\_

11 Handphone no. \_\_\_\_\_

12 e-Mail \_\_\_\_\_

\_\_\_\_\_

13 Return of C.P.8D  1 = Together with Form E    2 = Via Data Prefill  
 3 = Compact disc / USB drive / external hard disk

Name \_\_\_\_\_

Employer's No. E

**PART A: INFORMATION ON NUMBER OF EMPLOYEES FOR THE YEAR ENDED 31 DECEMBER 2018**

<b>A1</b>	Number of employees as at 31/12/2018	<input type="text"/>	<b>A2</b>	Number of employees subjected to MTD	<input type="text"/>
<b>A3</b>	Number of new employees	<input type="text"/>	<b>A4</b>	Number of employees who ceased employment	<input type="text"/>
<b>A5</b>	Number of employees who ceased employment and left Malaysia	<input type="text"/>	<b>A6</b>	Reported to LHDNM (If A5 is applicable)	<input type="checkbox"/> 1 = Yes <input type="checkbox"/> 2 = No

**Please Take Note**

**PART B: DECLARATION**

<b>A1</b>	<b>NUMBER OF EMPLOYEES AS AT 31/12/2018</b>	Total number of employees in the employer's company / business as at 31 December 2018 including full time / part time / contract employees and interns.
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Identification / Passport No. \*  
(\* Delete whichever is not relevant)

hereby declare that the return by this employer contains information which is true, complete and correct as required under the Income Tax Act 1967.

Signature

Date:

  
Day      Month      Year

Designation

  

**NOTE:** This declaration must be made by the employer in accordance with the category of employer as provided under sections 66 to 76 and section 86 of the Income Tax Act 1967